

# TOTAL HIP REPLACEMENT



Hip Surgery to Reduce Pain  
and Improve Movement

# Replacing a Damaged Hip Joint

Living with a worn or injured hip joint can be painful and frustrating. Over time, even simple daily tasks may cause pain. But you don't have to live this way. For many people, surgery to replace a damaged hip joint may be an option. This is called **total hip replacement**. This booklet will help you learn about hip replacement and what it means for you. It may also address many of your questions.



## A Problem Hip

No matter what age you are, a hip problem may keep you from activities you enjoy. Pain and stiffness may even limit your daily life. Causes of hip pain can include:

- Wear and tear of the hip joint from years of use (osteoarthritis)
- A previous hip fracture
- An inflammatory illness, such as rheumatoid arthritis
- Death of bone in the hip (avascular necrosis)

## Surgery Can Help

An **orthopedic surgeon** is a provider who treats bone and joint problems. They will work with you to determine whether hip replacement is right for you. During this surgery, the problem hip joint is replaced with an artificial joint called a **prosthesis**. The surgery can help relieve hip pain and restore function so you can move with greater ease.

## Benefits of Hip Replacement

Total hip replacement offers most people many benefits. The surgery will likely:

- Stop or greatly reduce hip pain. Even the pain from surgery should go away within weeks.
- Increase leg strength. Without hip pain, you'll be able to use your legs more. This will build up your muscles.
- Improve quality of life by allowing you to do daily tasks and low-impact activities in greater comfort.
- Provide years of easier movement. In many cases, hip replacements last upwards of 15 to 20 years.





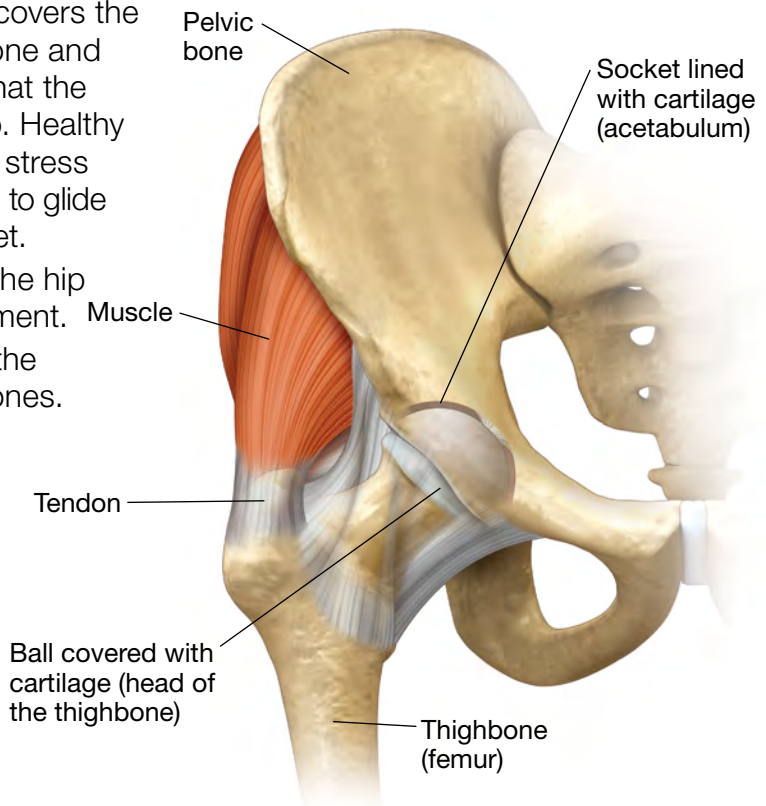
# How the Hip Works

The hip joint is one of the body's largest weight-bearing joints. It is a ball-and-socket joint. This helps the hip remain stable, even during twisting and extreme ranges of motion. A healthy hip joint allows you to walk, squat, and turn without pain. But if the joint is damaged, it is likely to hurt during movement, or even with standing or lying down.

## A Healthy Hip

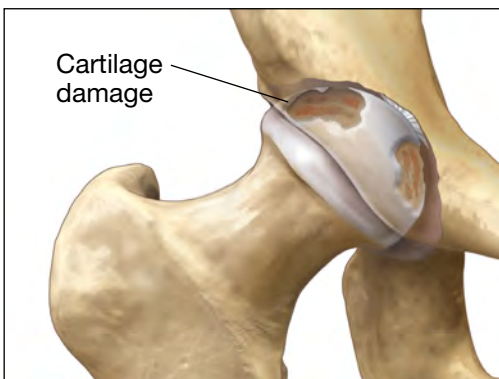
The hip joint is formed where the rounded head of the thighbone (ball) joins the pelvis. The joint surfaces are covered by cartilage. They are powered by large muscles. When all of the parts of the hip are healthy, the joint should move easily.

- **Cartilage** is a layer of firm, smooth tissue. It covers the ball of the thighbone and lines the socket that the thighbone fits into. Healthy cartilage absorbs stress and allows the ball to glide easily in the socket.
- **Muscles** power the hip and leg for movement.
- **Tendons** attach the muscles to the bones.



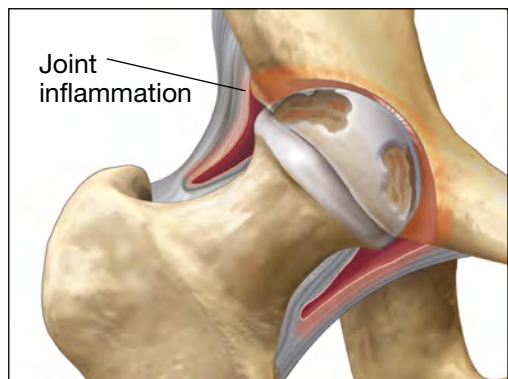
## A Damaged Hip

When one or more parts of the hip are damaged, movement is difficult and painful. Over time, cartilage may break down or wear away. When this happens, the bones making up the joint rub together. Stiffness and pain occur. The ball may also grind in the socket. Any of the problems below may lead to joint damage.



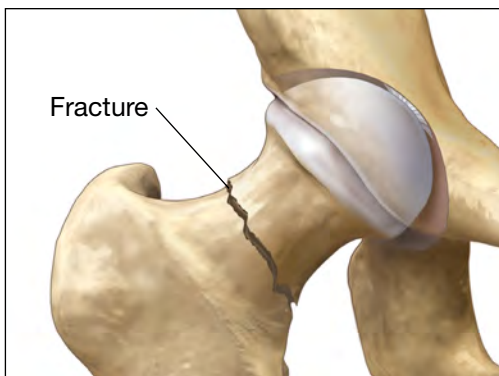
### Osteoarthritis

As time goes by, even normal wear and tear can damage cartilage and break it down. Bones then rub together and become rough and pitted. This wears down the socket.



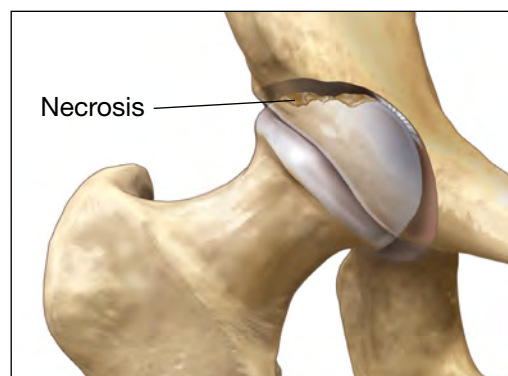
### Inflammatory Arthritis

A disease, such as rheumatoid arthritis or gout, can cause the lining of the joint to become inflamed (irritated and swollen). Over time, cartilage may wear away. This can lead to pain.



### Fracture

A bad fall or blow to the hip can break (fracture) the bone. If the broken bone does not heal properly, the joint may slowly wear down.



### Necrosis

A bad injury or long-term use of alcohol or steroids can reduce blood supply to the bone. If the bone dies (necrosis), the joint will decay.

# Is Surgery Right for You?

Your provider will examine your hip to determine the causes of your hip pain. Based on your diagnosis, you may have several treatment options. You and your surgeon will work together to review these and decide on your care plan. Hip replacement surgery may provide the best chance of relieving your pain.

## Your Evaluation

The surgeon will examine your hip. Also you will be asked about any past medical problems. Imaging tests, such as x-ray or MRI, help show damage to the hip joint. This exam and testing will help your surgeon recommend the best treatment for you.

## Your Treatment Options

Based on the results of your evaluation, your surgeon can outline possible treatments. They will also discuss the benefits and risks of these. Along with hip replacement surgery, your options may include:

- **Nonsurgical treatments**, such as weight loss, diet and activity changes, medications and supplements, physical therapy, exercises, and walking aids.
- **Other surgical treatments**, such as hip resurfacing and osteotomy.

►► Your treatment options may include weight loss and diet and activity changes.



## Be Informed

Hip replacement surgery has been recommended to help relieve your pain. Be sure to ask any questions you have. Understand what the procedure can and cannot do for you. Know what the alternatives are and what options you may have. Any surgery has risks, so be clear what the risks are for you. And know what you need to do to prepare for surgery and recover from it. By being informed, you can help your surgeon ensure that your needs are met.



## Risks and Complications

*As with any procedure, hip replacement has risks and complications. These include:*

- Infection
- Bleeding (may require a transfusion)
- Blood clots in the legs, pelvis, or lungs
- Continued pain, stiffness, or problems in the joint
- Damage to nearby blood vessels, bones, or nerves
- Loosening or wearing out of implant (may require surgery to fix)
- Hip fracture or dislocation of the joint
- Change in leg length
- Risks of anesthesia



# Getting Ready for Surgery

You can take steps to prepare for surgery. Start by making changes around the house. Also arrange for someone to help you after your surgery. These steps can make recovery safer and easier. Follow your surgeon's instructions for tests, exercises, and other preparations. If you're a smoker (or use nicotine in any form), do your best to stop or cut down. Your surgery risks and recovery rate will improve.

## ✓ Prepare at Home

To make your home safer after surgery, here are some recommendations:

- **Install equipment** you may need to aid in recovery. These include handrails and grab bars in the bath and special seats for the toilet and shower.
- **Prepare an area** on the main living level where you can rest and do most of your activities. Set things up so that you can avoid using any stairs.
- **Pick up clutter** and remove throw rugs. Tape down electrical cords.
- **Store supplies** between waist and shoulder level to reduce the amount of reaching and bending you'll have to do.

## ✓ Arrange for Help

After your hip replacement, you won't be able to drive for a few weeks. Have a family member or friend deliver groceries and help you run errands. If you live alone, ask someone to stay with you after your surgery. You might want to arrange for a home health worker to assist you. If you cannot return home, you may stay in a rehabilitation facility for a week or two.

▶▶ Arrange for someone to deliver groceries and help run errands after surgery.





▶▶ See your dentist to treat any tooth or gum problems you have before surgery.



### ✓ See Your Provider

Your primary care provider helps optimize your health for surgery:

- You may have lab or blood tests. You may also have a chest x-ray and an ECG (electrocardiogram).
- Talk with your provider about health problems that need attention before surgery. These include diabetes and high blood pressure.
- Work with your provider to treat any infections before surgery.

### ✓ Discuss Your Medications

Tell your surgeon about all of the medications you take. This includes herbs, supplements, and over-the-counter medications. Some medications, such as blood thinners, aspirin, and ibuprofen, increase bleeding. You may need to stop taking them before your surgery.

### ✓ Do Your Prehab

Prehabilitation (often called prehab) can help you get back to function faster after surgery. Prehab includes doing prescribed stretching and strengthening exercises before surgery. It may also include practicing doing tasks and activities. Follow any prehab program you are given.

### ✓ Finish Dental Treatment

If germs in the mouth enter the bloodstream, they can infect the new joint. So finish any dental work that has begun. And have tooth or gum problems treated before surgery.

# Your Hip Replacement

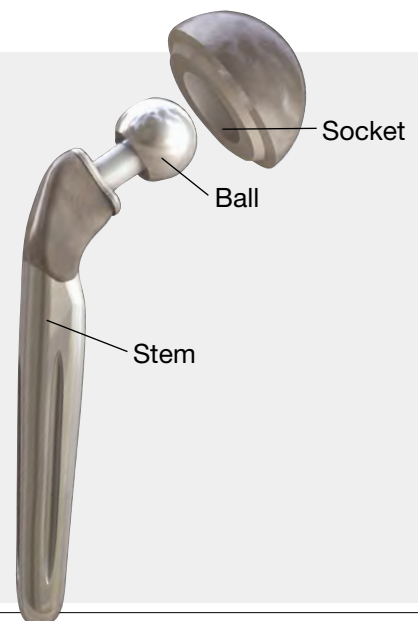
Get ready for your surgery as instructed. This will include not eating or drinking anything after a certain time before surgery. When you arrive at the hospital, you'll be guided through preparations. It's normal to feel a little nervous. But rest assured, this is a common procedure that tends to have very good results.

## Before Surgery

- You'll talk with the anesthesiologist, the provider who gives you **anesthesia**. During surgery, this medication keeps you free from pain. You may be relaxed and drowsy, or in a state like deep sleep.
- An **IV (intravenous) line** will be started. This line gives fluids and medications.
- You'll likely be asked your name, what surgery you will have, and which hip is being replaced. You may be asked more than once. This is for your safety. The hip that is to be operated on will also be marked.

## Your New Hip

A hip prosthesis is designed to work like a healthy joint. It has the same parts (ball and socket) as a natural hip joint. The new joint may be made of ceramic, plastic, metal, or other materials. You and your surgeon will discuss the exact type of prosthesis that will be used before the surgery.

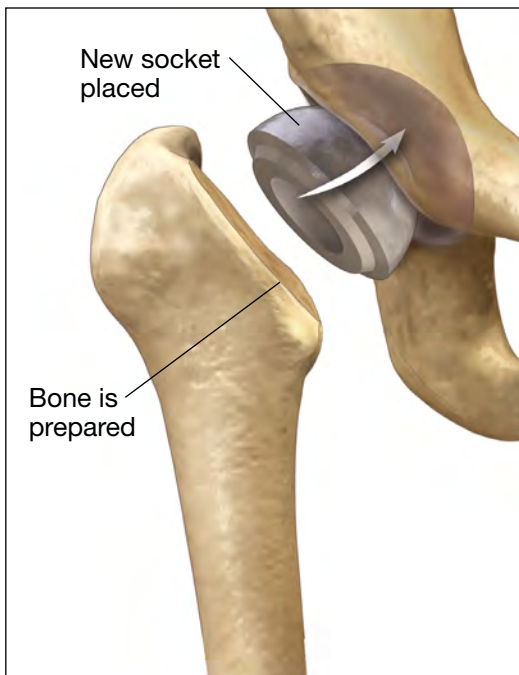


**Anterior** means front  
**Lateral** means side  
**Posterior** means back  
**Superior** means above



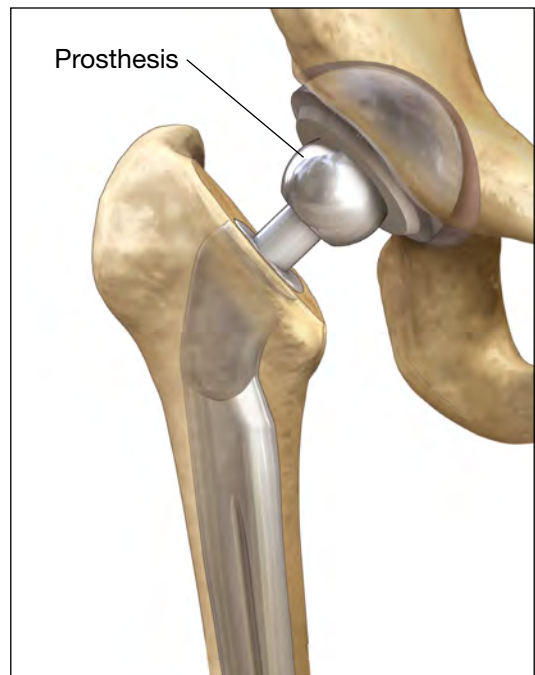
## The Surgical Procedure

When the surgical team is ready, you'll be taken to the operating room. The surgery may be done through the back (posterior) of the hip joint. Or it may be done through the front (anterior) or side (lateral) of the hip joint. Depending on the approach used, one or more incisions are made to access the hip joint. The damaged ball is removed, and the socket is prepared to hold the prosthesis. After the new joint is in place, incisions made are closed with staples, stitches, or surgical glue.



### Preparing the Bone

The ball is cut from the thighbone, and the surface of the old socket is smoothed. Then the new socket is put into the pelvis. The socket is usually press-fit and may be held in place with screws or cement. A press-fit prosthesis has tiny pores on its surface that your bone will grow into.



### Joining the New Parts

The new hip stem is inserted into the upper part of your thighbone. After the stem is secure, the new ball and socket are joined. The stem of the prosthesis may be held with cement or press-fit. Your surgeon will choose the method that is best for you.

# After Surgery

After surgery, you'll go to a recovery room. Pain medications will be given as needed. Measures will also be taken to help prevent blood clots and lung problems. While you're in the medical facility, you may learn how to move in ways that protect your new hip. These are called movement precautions.

## Managing Pain

At first you may feel pain, even with medication. This is normal. If your pain is not well-controlled, be sure to tell the nurse. Pain medication may be given orally, injected into a muscle, or delivered by IV into the bloodstream. In certain cases, a PCA (patient-controlled analgesia) pump may be used. This lets a person administer their own pain medication within safe limits.

## Preventing Blood Clots

Blood clots in the veins of the legs or pelvis can be a problem after hip surgery. To reduce the risk for blood clots, you'll elevate your operated leg above heart level for short periods throughout the day. You may be given support stockings and compression devices to wear. Blood thinning medications may also be given. Getting up and walking also helps prevent blood clots. So you're likely to be out of bed within the first 24 hours.

## Clearing Your Lungs

Fluid can collect in the lungs after any surgery. To avoid pneumonia, breathe deeply and cough. You should do this a few times an hour, at least. A respiratory therapist or nurse may also show you how to use an incentive spirometer. This device can help you breathe more deeply.

## Learning to Move Safely

Until it is fully healed, your new hip may have a limited safe range of motion. Your surgeon, **physical therapist (PT)**, or **occupational therapist (OT)**, will teach you any needed movement precautions. Some are shown at right.

**Note:** Movement precautions will differ based on the approach used for surgery. Be sure to follow the guidelines given by your surgeon, PT, or OT.



## Posterior Movement Precautions



Always sit with your hips higher than your knees.



Sit with both feet on the floor. Keep your knees about 6 inches apart.



**Don't** let the knee on the operated leg cross the midline of your body.



**Don't** bend over so your upper body is lower than your waist. Keep this in mind when standing and sitting.



**Don't** turn your operated leg inward in a pigeon-toed stance. Keep this in mind when standing and lying down.

## Anterior Movement Precautions

For the anterior approach, you might be given certain movement precautions. For instance, you may be told to avoid stepping too far backward. You also may be told not to turn your foot outward.



**Don't** step too far back with your operated leg.



**Don't** turn your operated leg outward.

# Back to Activity

**When you're well enough, you'll leave the medical facility. Most people return straight home, though a short stay in a rehabilitation facility is sometimes recommended. During your recovery, protect your new hip. Sit and move in the ways you're taught. Return to activity slowly. And be sure to see your surgeon for scheduled post-op visits. These help make sure that you're healing well.**

## Getting Up and Moving Again

You will likely get up and walk within hours after surgery. You may have a mobility aid, such as a walker or crutches, to help you. If an IV and catheter are still in place, this may be a little tricky. But don't worry, your PT will help you. You'll be taught how much weight to put on your new joint. With practice, you'll soon be able to walk with your mobility aid. Your PT will also teach you exercises to strengthen your muscles and improve the range of motion in your hip. Be sure to do these exercises as directed.



►► **Mobility aids, such as a walker, can help you move around after surgery until you're fully recovered.**

## Sitting and Dressing

To protect your new hip, your OT or PT will teach you safer ways of doing daily tasks. Use the following tips when sitting, dressing, or using stairs.

- To sit, back up until the edge of the chair touches your leg. Then, using the armrests to support your weight, lower yourself into the seat. Always keep your operated leg out in front.
- To pull on socks and shoes, use a long-handled device, such as a grasper or hook. Try this with slip-on shoes first.
- To wash your feet and legs, use a long-handled sponge and a shower hose.
- To use stairs, step up first with your good leg. Then bring your operated leg up to meet it. When going down, step down first with your operated leg.



## Returning to Daily Life

To build strength, walk daily. And keep doing your exercises. Try to do more each week. You and your surgeon will discuss when it's OK for you to drive again or return to work. Your surgeon can also advise you about the types of sports and hobbies you can safely resume.

**If you are ready to have sex,** ask your surgeon about positions that are safe for your hip. You can likely return to having sex after the incision heals and you regain some hip movement.

## Maintaining Your New Joint

Always tell any healthcare provider or dentist you visit that you've had a hip replacement. You may need to take antibiotics before medical or dental procedures. This helps prevent infection, which could harm your new joint. To check joint stability over time, you may have X-rays. Your provider will tell you whether these are needed and how often.

## When to Call Your Surgeon

*Call your surgeon  
if you have:*

- Trouble breathing or chest pain
- An increase in hip pain
- Pain or swelling in a calf or leg
- Unusual redness, heat, or drainage at the incision site
- Fever of 100.4°F (38°C) or higher, or as directed by your surgeon





## Talk with Your Surgeon

Hip replacement surgery can greatly relieve the pain in your hip and get you moving again. Talk with your surgeon about your goals for surgery. They can help you decide whether hip replacement is the best choice for you. You *can* feel good again. Your surgeon and healthcare team will help you every step of the way.

## Your Surgery Experience

The better prepared you are for surgery, the easier your recovery is likely to be. To help ensure a successful surgery:

- Follow pre-op instructions carefully.
- Take recommended steps to optimize your health.
- Have support during your recovery.
- Keep all follow-up appointments with your surgeon.
- Complete your rehabilitation or physical therapy program as directed.

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